## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

\$

or <u>Fax</u> (571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

	CE ADDRESS (Note: Use Block 1 for 590 12/21/2005	rany change of address)		Note: A certificate of Fee(s) Transmittal. The papers. Each addition have its own certificate	f mailing can only be used finis certificate cannot be used all paper, such as an assignmente of mailing or transmission.	or domestic mailings of the for any other accompanying ent or formal drawing, must
Dr Mark Friedma c/o Bill Polkinghor 9003 Florin Way Upper Marlboro, N	rn-Discovery Dispatch	MAR 1-7 20	006	Ce I hereby certify that the States Postal Service addressed to the Matransmitted to the USI	ertificate of Mailing or Transhis Fec(s) Transmittal is bein with sufficient postage for fir il Stop ISSUE FEE address PTO (571) 273-2885, on the control of	smission g deposited with the United st class mail in an envelope above, or being facsimile date indicated below.
.,		WAR AND MAN				(Depositor's name)
						(Signature)
						(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INV	ENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/674,825	12/18/2000	Karina Rozhetsk		sky	1659/3	5255
TITLE OF INVENTION: C	ARBOXYLIC CATIONITE	ES AND METHOD	S OF MANUFAC	TURE		
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	•	\$0	\$700	03/21/2006
EXAMINER		ART UN	IIT I	CLASS-SUBCLASS	7	
LIPMAN, BERNARD		1713		521-026000		·
1. Change of correspondence address or indication of "Fee Address or indication or indicatio					·	
CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND						
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified by 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will appear or Γ a substitute for fil	the patent. If an assignment.	nec-is-identified below the d	locument has been filed for 18 062140 09674825
(A) NAME OF ASSIGNEE		(B) RESIDENCE: (CITY and STAT		ITY and STATE ઉંR ĆÔ	uÑfky) 700.00 D	A
POLYGRAN LTD. HAIFA, ISRAEL						
Please check the appropriate	e assignee category or catego	ories (will not be pr	inted on the patent)	: Individual 20 C	Corporation or other private gr	oup entity Government
4a. The following fee(s) are	enclosed:	46	. Payment of Fee(s	):		<u> </u>
Issue Fee			A check in the amount of the fee(s) is enclosed.			
Publication Fee (No s	•	Payment by credit card. For				
Advance Order - # of Copies			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 66-3140 (enclose an extra copy of this form).			
5. Change in Entity Status	(from status indicated above	e)			<u> </u>	
	MALL ENTITY status. See				LL ENTITY status. See 37 C	
The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the reco	is requested to apply the Iss ublication Fee (if required) ords of the United States Pat	ue Fee and Publicat will not be accepted ent and Trademark	tion Fee (if any) or I from anyone other Office.	to re-apply any previous r than the applicant; a reg	ly paid issue fee to the applicatistic attorney or agent; or the	ation identified above. the assignee or other party in
Authorized Signature	M	<b>a</b> .		Date	1-r. 15.06	
Typed or printed name MARK M. FRIEDMAN						
This collection of informatic an application. Confidentiali submitting the completed at this form and/or suggestions Box 1450, Alexandria, Virg Alexandria, Virginia 22313-	on is required by 37 CFR 1.3 ity is governed by 35 U.S.C oplication form to the USPTs for reducing this burden, slinia 22313-1450. DO NOT 1450.	11. The information 122 and 37 CFR O. Time will vary hould be sent to the SEND FEES OR C	n is required to obtain 1.14. This collection depending upon the Chief Information COMPLETED FOR	ain or retain a benefit by n is estimated to take 12 e individual case. Any co Officer, U.S. Patent and MS TO THIS ADDRES	the public which is to file (an minutes to complete, includir omments on the amount of ti 1 Trademark Office, U.S. Dep S. SEND TO: Commissioner	d by the USPTO to process) ng gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.